## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000009489

Title:

Name:

Address:

City-St-Zip:

FILED Jul 05, 2004 Secretary of State

Entity Name: ONE-BODY WORLDWIDE MINISTRIES, INC. **Current Principal Place of Business: New Principal Place of Business:** 7572 SUGAR BAY LANE JACKSONVILLE, FL 32256 **Current Mailing Address: New Mailing Address:** 7572 SUGAR BAY LANE JACKSONVILLE, FL 32256 **FEI Number:** FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: IBEGBU, ERIC 7572 SUGAR BAY LANE JACKSONVILLE, FL 32256 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: PST () Change () Addition () Delete IBEGBU, ERIC Name: Name: Address: 7572 SUGAR BAY LANE Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: Title: Title: ( ) Delete () Change () Addition Name: IBEGBU, SHELLEY ANN Name: Address: 7572 SUGAR BAY LANE Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: Title: () Delete Title: () Change () Addition DICKERSON, ZELMA Name: Name: 6608 OLD KINGS ROAD Address: Address: City-St-Zip: JACKSONVILLE, FL 32219 City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition Name: Name: PAXTON, DUSTY 3061 HICKORY GLEN DRIVE, Address: Address: City-St-Zip: City-St-Zip: ORANGE PARK, FL

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: IBEGBU PST 07/05/2004

() Delete

( ) Change (X) Addition

PRATT, LAWRENCE

JAX, FL 32277

3500 UNIVERSITY BLVD., N #606